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Substitute for form 1449/PTO		Complete if Known			
				Application Number	10/553,424-Conf. #1484
INFORMATION DISCLOSURE				Filing Date	October 18, 2005
STATEMENT BY APPLICANT (Use as many sheets as necessary)			APPLICANT	First Named Inventor	Masashi TAMURA
				Art Unit	2624
			s necessary)	Examiner Name	M. A. Newman
eet	1	of	1	Attorney Docket Number	1163-0536PUS1

			U.S. PA	TENT DOCUMENTS	
Examiner Initials*		Document Number Number-Kind Code ² (if known)	Publication Date MM-DD-YYYY		Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
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		FORE	GN PATENT	DOCUMENTS		
Examiner Initials*	Cite No.1	Foreign Patient Document Country Code ² -Number ⁴ -Kind Code ² (If known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages Or Relevant Figures Appear	T°
/M.A.I	NBA	JP-2003-304549-A	10-24-2003			ABS
/M.A.N	BB	JP-2000-23173-A	01-21-2000			ABS
M.A.N	BC	WO-99/30547-A2	06-17-1999			ABS
AAN/	BD	EP-1 315 367-A2	05-28-2003			ABS
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Date

Considered

02/14/2011

Examiner

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Signature

/Michael Newman/

Translation is attached.

		NON PATENT LITERATURE DOCUMENTS	
Examiner Initials	Cite No.1	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T²
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